

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail****Mail Stop ISSUE FEE
Commissioner for Patents
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

10/20/2004

Kevin L. Russell

Suite 1600

601 SW Second Ave.

Portland, OR 97204-3157

01/07/2005 HALI22 00000109 10616164

01 FC:1501

1400.00 OP

02 FC:1504

300.00 OP

03 FC:8001

9.00 OP

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Kevin L. Russell

(Depositor's name)

(Signature)

(Date)

1/3/05

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/616,164	07/07/2003	Paul A. Tervo	KLR 1016.2010	9750

TITLE OF INVENTION: LOW-CURRENT POGO PROBE CARD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	xx\$1375x \$1400	\$300	xx\$1700x \$1700	01/21/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, VINH P	2829	324-754000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Chernoff Vilhauer

1. ~~McClung & Stenzel, LLP~~

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Cascade Microtech, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

2430 NW 206th Avenue

Beaverton, Oregon 97006

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 3

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-1550 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

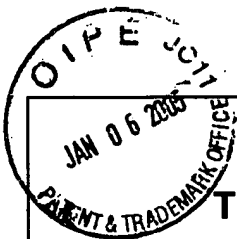
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Authorized Signature _____

Date 1/3/05Typed or printed name Kevin L. RussellRegistration No. 38,292

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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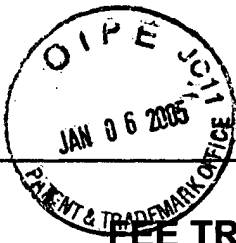
TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number	10/616,164	
	Filing Date	July 7, 2003	
	First Named Inventor	Paul A. Tervo	
	Art Unit	2829	
	Examiner Name	Vinh P. Nguyen	
Total Number of Pages in Submission		Attorney Docket Number	KLR 1016.2010

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Issue Fee, Publication Fee, Additional Copies Fee, Check in the amount of \$1709.00 and return acknowledgement postcard		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Or Individual Name	Kevin L. Russell, Reg. No. 38,292 Chernoff, Vilhauer, McClung & Stenzel, LLP 1600 ODS Tower 601 S.W. Second Avenue Portland, OR 97204	
Signature		
Date	1/7/05	

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or Printed Name	Kevin L. Russell, Reg. No. 38,292		
Signature		Date	1/5/05



FEE TRANSMITTAL For FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Complete if Known

<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/616,164
TOTAL AMOUNT OF PAYMENT		Filing Date	July 7, 2003
\$1709.00		First Named Inventor	Paul A. Tervo
		Examiner Name	Vinh P. Nguyen
		Art Unit	2829
		Attorney Docket Number	KLR 1016.2010

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (Continued)																																															
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																																															
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The Director is authorized to: (check all that apply)																																																	
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<table><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr><tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td></td></tr><tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing Fee</td><td></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="4">SUBTOTAL (1)</td><td></td><td>\$</td></tr></table>		Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	770	2001	385	Utility filing fee		1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing Fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					\$		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																																	
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**or number previously paid, if greater; For Reissues, see above.																																																	
		Other fee (specify) Publication Fee/Additional Copies Fee 309.00																																															
		SUBTOTAL (3) \$ 1700.00																																															

SUBMITTED BY		(Complete (if applicable))	
Name (Print/Type)	Kevin L. Russell	Registration No. (Attorney/Agent)	38,292
Signature		Telephone	(503) 227-5631
		Date	1/3/05

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